

## **PART IV. DETERMINING NEEDS AND PRIORITIES**

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In determining the priority community needs for the next five years, the Department of Housing and Community Development (DHCD) reviewed the 2000 Census data, consulted analyses of the DC housing market and other studies by the Greater Washington Council of Governments (COG), the Fannie Mae Foundation, the Fiscal Policy Institute and other regional and local research organizations. The Department also conferred with other DC Government Agencies, with stakeholder organizations and residents. As the lead agency for low-to-moderate housing opportunities in the District of Columbia, DHCD has confirmed through its consultation and analysis that its focus over the coming years should remain on:

- ? the retention, rehabilitation and production of affordable housing,
- ? incentives to include development of housing for very-low to moderate-income residents; for the homeless; and special needs' populations;
- ? promoting homeownership opportunities, and
- ? support for neighborhood commercial and economic revitalization.

In the District of Columbia, given external constraints on revenue generation and on the availability of land for continued growth, housing development and the retention and attraction of tax-paying residents is part of the City's strategy for economic development. Stabilizing neighborhood housing leads to DHCD's support for retention and growth of neighborhood businesses as a source of local jobs, economic opportunity and neighborhood vitality. Particularly for that segment of the population without advanced education and facing escalating housing prices, DHCD's focus on neighborhood-level economic opportunity combined with retention of affordable housing will assist our more vulnerable populations.

### **COMMUNITY PRIORITIES**

In the community hearings and "brown-bag" lunch meetings (Appendix D) held in preparing this Plan, government, non-profit and community representatives overwhelmingly supported expansion of affordable housing opportunities as the number one priority for DHCD over the Five-Year Plan period. The community stressed the need for inclusiveness, for both rental and owner housing opportunities; preservation, rehabilitation and new housing; housing for extremely-low—to moderate-income residents; housing with access for persons with a range of special needs and housing for the elderly.

From the input received from studies, citizens, stakeholders and government agencies, DHCD and other government agencies completed the HUD Needs Tables, which start on page 24.

Many of the community development priorities in these tables will be met by DC government agencies and/or non-profit organizations, using a combination of local and federal funds, but not specifically CDBG, HOME, ESG or HOPWA funding. The use of other government or private funds by these agencies enables DHCD to focus its HUD funds and local funds on housing and neighborhood development priorities set during its community consultation process.

## HOUSING AND SERVICE NEEDS

### *General Housing Needs*

Table 6, Table 7, and Table 8, starting on page 24, portray the District's general affordable housing needs. As noted earlier, DHCD estimates that 35 percent of the renter households in the District are cost-burdened, paying more than 30 percent of their incomes for housing costs. This percentage holds true among both single person or unrelated households and the "family" households shown in Table 6 – small related, large related, and elderly. Within that 35 percent, elderly renters experience the highest degree of cost burdening, at 43 percent, while all other renter households experience cost-burdening rates of 30-33 percent.

While it is difficult to disaggregate estimates of substandard or over-crowded conditions from those of cost-burdening *and* substandard or over-crowded conditions, DHCD's analysis suggests that at least 15 percent of the rental units are substandard, experiencing moderate or severe problems such as failures of kitchen or plumbing equipment, holes in walls, etc.<sup>18</sup> It is not possible to estimate whether certain types of renter households are more prone to experience these problems than others, although we assume that moderate-income households (those with incomes above 80 percent of the area median income) are less likely to experience such conditions. Evidence suggests that far fewer homeowners have experienced substandard conditions, but anecdotal evidence shows that there are many homes experiencing multiple severe problems. DHCD also estimates that 13 percent of renter households overall experience overcrowding, 8 percent severely so. There appears to be a need for anywhere from 6,000 to 13,000 units with three or more bedrooms.

*Housing Need and Income:* The needs of extremely low-income households (those earning 30 percent of the area median income or less) appear particularly dire. Census data shows that roughly 70 percent of all extremely low-income households of all types (elderly, family, non-family) experienced some form of housing problem<sup>19</sup> in 2000. Only one quarter of the District's rental units were affordable to extremely low-income households, but extremely low-income households were occupying only 16 percent of the units that were affordable at that level. (For large units, the percentage of extremely low-income households occupying units affordable to them was even smaller.) No for-sale units were affordable to unassisted extremely low-income households, and those households that were homeowners experienced high levels of cost burdening. Similarly, 65 percent of the rental units were affordable to low-income households (those earning up to 50 percent of the AMI), but extremely low- and low-income households occupied only 53 percent of those units. Given the dramatic increase in housing costs over the past five years, the mismatch between affordable supply and demand is undoubtedly greater now.

*Housing Need and Race/Ethnicity or Other Needs:* The data in Table 7 and Table 8 suggests that lower-income Hispanic households and Asian households (particularly family households) experience housing problems at a disproportionate rate to other households, although they represent only 8 percent of the households overall. They experience cost burdening, substandard

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<sup>18</sup> This is the percentage left when the count of cost-burdened households is subtracted from the count of households with any housing problem.

<sup>19</sup> Cost-burdening, substandard housing and/or overcrowding.

Table 6: Housing Needs Table

Housing Needs			% Lead Based	Needs- Current= Gap		5-Year Quantities										% of Goal		Priority Plan to Fund Need Fund? Source				
						Year 1		Year 2		Year 3		Year 4		Year 5							Cumulative	
						Goal	Actual	Goal	Actual	Goal	Actual	Goal	Actual	Goal	Actual	Goal	Actual	Goal	Actual			
Renter	Small Related	1. Burden 0-30%	68	30237	30237	0	cumulative goals are provided for each category of household										0	0	0%	H	Yes	Fed/ local
		2. Burden 30-50%	68	5962	0	5962																
		3. Burden >50%	68	6691	0	6691																
		4. Substandard	68	6605	0	6605																
		5. Overcrowded	68	5576	0	5576																
		Subtotal - Small**		12653	1162	11491	794	794	794	794	794	3970										
	Large Related	6. Burden 0-30%	68	6805	6805	0											0	0	0%	H	Yes	Fed/ local
		7. Burden 30-50%	68	1514	0	1514																
		8. Burden >50%	68	1914	0	1914																
		9. Substandard	68	1576	0	1576																
		10.Overcrowded	68	1330	0	1330																
		Subtotal - Large**		3428	384	3044	264	264	264	264	264	1320										
	Elderly	11.Burden 0-30%	68	12732	12732	0											0	0	0%	H	Yes	Fed/ local
		12.Burden 30-50%	68	4534	0	4534																
		13.Burden >50%	68	5071	0	5071																
		14.Substandard	68	3440	0	3440																
		15.Overcrowded	68	2904	0	2904																
		Subtotal - Elderly**		9605	258	9347	250	250	250	250	250	1250										
Owner		16.Burden 30-50%	68	13660	0	13660											0	0	0%	H	Yes	Fed/ local
		17.Burden >50%	68	9916	0	9916																
		18.Substandard	68	4452	0	4452																
		19.Overcrowded	68	13154	0	13154																
		Subtotal - Owner**		23576	117	23459	200	200	200	200	200	1000										
Note: ** Needs to be met have been determined to be cost burdened units 30-50% and >50%. Current numbers represent DHCD's annual units funded production consisting of an average of the actual FY 2003 and 2004 units funded.																						

housing, and/or overcrowding at a rate that is at least 10 percentage points higher than that of the population at large. Since Hispanic and Asian households have a high number of recent immigrants, these findings point to a need for housing outreach to immigrant communities.

There also is a high percentage of low-income white households experiencing housing problems, which may in part reflect the relatively large number of low-paid (or unpaid) students, interns, and entry-level workers entering the district on a transient basis, insofar as it is the white non-family households that experience housing problems at especially high rates compared to other types of households. However, lower-income white elderly households also experience relatively high rates of rental housing problems.

**Table 7: Percentage of renter households experiencing housing problems**

<b>Income range (% of AMI)</b>	<b>All</b>	<b>White, non- Hisp.</b>	<b>Black, non- Hisp.</b>	<b>Hispanic</b>	<b>Asian, non- Hisp.</b>	<b>Mobility/Self-Care Limit.<sup>20</sup> (all races)</b>
<i>All Households (#)</i>	147,052	42,875	84,850	10,768	4,790	22,455
<30%	70.6	78.6	68.4	81.3	67.6	64.3
31-50%	57.0	77.1	47.9	76.0	80.8	48.6
51-80%	30.9	42.9	20.1	59.4	45.8	29.1
>80%	13.8	11.2	12.3	35.8	26.7	22.0
<i>Elderly HH (#)</i>	22,237	4,245	16,670	778	N/A	4,130
<30%	63.0	81.1	61.3	67.3	N/A	58.4
31-50%	46.0	60.0	43.3	37.0	N/A	36.1
51-80%	19.5	31.4	13.9	10.3	N/A	15.7
>80%	7.3	9.8	4.1	4.0	N/A	9.5
<i>Family HH (#)</i>	53,123	6,160	38,100	6,090	N/A	4,450
<30%	76.9	61.5	75.2	90.0	N/A	N/A
31-50%	54.4	60.3	47.5	85.2	N/A	N/A
51-80%	39.7	53.4	29.5	70.3	N/A	N/A
>80%	24.4	17.1	20.3	55.4	N/A	N/A
<i>Other HH (#)</i>	71,592	32,470	29,810	3,900	N/A	13,875
<30%	69.8	79.6	64.5	74.0	N/A	69.1
31-50%	63.4	82.5	50.8	65.7	N/A	54.9
51-80%	27.5	43.4	13.2	39.1	N/A	34.2
>80%	9.2	9.9	6.1	15.0	N/A	26.6

N/A – data not available.

<sup>20</sup> See discussion of Special Needs Housing, following section.

Table 8: Percentage of home owning households experiencing housing problems

Income range (% of AMI)	All	White, non- Hisp.	Black, non- Hisp.	Hispanic	Asian, non- Hisp.	Mobility/Self-Care Limit. (all races)
<i>All Households (#)</i>	101,184	40,625	53,860	3,324	1,585	16,178
<30%	68.8	75.1	66.8	80.5	60.0	70.1
31-50%	55.2	55.8	53.6	73.0	56.5	50.9
51-80%	42.4	43.7	40.1	63.6	74.2	35.5
>80%	13.5	11.9	13.7	31.6	21.5	13.8
<i>Elderly HH (#)</i>	27,068	9,655	16,320	395	N/A	4,668
<30%	60.6	63.0	60.4	45.5	N/A	66.5
31-50%	36.7	32.4	37.0	40.0	N/A	37.4
51-80%	26.5	30.1	24.5	40.0	N/A	25.1
>80%	9.6	8.5	10.3	21.1	N/A	7.2
<i>Family HH (#)</i>	44,815	14,655	26,785	1,944	N/A	2,420
<30%	78.8	88.2	77.2	97.5	N/A	N/A
31-50%	47.8	64.7	67.4	79.5	N/A	N/A
51-80%	35.1	55.3	42.6	75.0	N/A	N/A
>80%	10.5	10.9	12.8	36.9	N/A	N/A
<i>Other HH (#)</i>	29,301	16,305	10,755	985	N/A	9,090
<30%	85.4	81.5	66.6	75.0	N/A	76.4
31-50%	68.6	77.9	68.9	86.7	N/A	67.7
51-80%	50.0	51.1	57.1	45.0	N/A	43.2
>80%	25.0	14.7	19.2	24.6	N/A	17.4

**Lead-Based Paint:** DHCD has estimated there are 98,912 housing units with lead-based paint (LBP) hazards in the District, totaling 39.8 percent of the count of occupied properties. DHCD further estimates that 62,809 of them are occupied by low-income households.<sup>21</sup>

**Summary:** This data points to a clear need for affordable, appropriately-sized rental housing through the range of extremely low- to moderate-income households, but particularly for extremely low-income and elderly households. There is a need for rehabilitation programs for both multifamily and single-family residences (and, presumably, better enforcement of housing codes for rental properties), both to improve housing quality and to reduce lead-based paint hazards. Finally, there needs to be greater outreach and marketing of decent housing to the District's immigrant population. Production goals and related efforts to address these problems are addressed in Part V, the Strategic Plan.

<sup>21</sup> This estimate is based on the HUD/National Institute of Environmental Health Studies' National Survey of Lead and Allergen in Housing (NSLAH), October 31, 2002, which showed that, nationally, LBP hazards were found in 68% of the housing unit built before 1940, 43% of the housing units built between 1940 and 1959, and 8% of the housing units built between 1960 and 1977. (LBP was banned for residential use in 1978.) Application of these percentages to the inventory of occupied housing units in the District results in a total of 98,912 with LBP hazards. DHCD further estimates that 63.5% of the households meet the HOME low-income definition. 63.5% of 98,912 equals 62,809.

## SPECIAL NEEDS HOUSING

Table 9 focuses on the housing and service needs of persons with particular challenges: the elderly and frail elderly, persons with physical or mental challenges, persons with AIDS, and persons struggling with addiction, as well as public housing residents.<sup>22</sup> (See the discussion above for information on housing needs for people with mobility impairments or other self-care limitations.)

The 2000 Census estimates that 22 percent of the District population has some form of disability, such as sensory impairment, mobility impairment, mental disability, or other inability to perform activities of daily living. Just over 12 percent of the population, approximately 70,000 people, are elderly (aged 65 or over); 9,000 of these residents (1.6 percent of the total population) can be considered frail elderly, at 85 years or older. In addition, at the end of 2002, there were 15,132 reported AIDS cases, representing approximately 2.6 percent of the population.

DHCD's impact on this population is limited to the financing of housing for elders and persons with other special needs, and the financing of modifications to make single family homes accessible to persons with mobility impairments. Five percent of all new housing units developed in the District must be accessible to persons with mobility impairments, and another two percent must be accessible to persons with visual or hearing limitations, and DHCD enforces this requirement. However, the District as a whole offers residences and services for persons with special needs through the following agencies:<sup>23</sup>

- ? Office on Aging
- ? Department of Mental Health
- ? Addiction Prevention and Recovery Administration (Department of Health)
- ? HIV/AIDS Administration (Department of Health)
- ? Mental Retardation and Developmental Disabilities Administration (Department of Human Services)

For persons with mental health issues, there are a variety of group homes across the city, as well as supportive services. The Office on Aging operates or oversees 51 nursing homes and community residences. The Department of Health has 176 beds for substance abusers. The HIV/AIDS Administration offers 474 units, though rental assistance, supportive housing or emergency housing. For persons with mental disabilities, there are over 1,200 units available in community residential facilities, group homes, supervised apartments, and other institutions.

### *Housing Suitable for Persons with Disabilities:*

The District of Columbia Housing Authority (DCHA) is currently midway through a six-year program to produce housing units for low income persons that meet Uniform Federal Accessibility Standards (UFAS) standards. At this writing, 326 such units have been completed and are available for households that include one or more persons with accessibility requirements. DCHA has committed to producing a total of 565 UFAS accessible units by the completion of this program in 2007.

<sup>22</sup> The needs of public housing residents are discussed on [Appendix E](#)].

<sup>23</sup> There is no District agency that focuses on the needs of mobility-impaired persons only.

DCHA tracks the number of low-income households on its waiting list for affordable housing whose members include one or more persons needing accessible housing accommodations. At this writing, the number of such households is 100.

Data from the DC Housing Authority on the available stock of and community needs for housing accessible to disabled persons are likely not exhaustive of the entire stock of and need for accessible housing in the District. Still those data are representative of the stock and needs for low income households, a large percentage of whom are either housed in DCHA housing units or on the waiting list for such units.

*Housing Needs Data and Mobility Impairment:*

As shown in Table 7 and Table 8 above, lower-income persons with mobility or self-care limitations appear to experience housing problems in the same proportions as persons without such limitations. It is only middle- and higher-income households with mobility or self-care limitations that experience housing problems. While these data do not indicate an especially severe need for affordable special needs housing specifically for lower-income persons with mobility impairments, it must be recognized that much of the District's rental housing was constructed before accessibility requirements were enacted into law. In addition, the row-house configuration of many of the District's single family homes requires modification to make such housing accessible.

Beyond residences, many of the District's special needs residents require services to help them with activities of daily living. Many of the residential facilities offered by the agencies listed above include a supportive service component. Others maintain services-only facilities.

Another need, which is not captured above, is the need for housing for minors and young adults in the Child and Family Services Administration foster care system. Between 2005 and 2011, 867 residents aged 15 to 21 will age out of the foster care system. Ninety-three of these residents are pregnant. Without adequate housing and assistance, many of these residents may join the homeless population.

Table 9: Non-Homeless Needs Table

Non-Homeless Needs		Needs- Current= Gap		5-Year Quantities												% of Goal	Priority Need Plan to Fund Fund? Source		
				Year 1		Year 2		Year 3		Year 4		Year 5		Cumulative					
				Goal	Actual	Goal	Actual	Goal	Actual	Goal	Actual	Goal	Actual	Goal	Actual				
Housing Needed	52.Elderly	2000	1048	952									0	0					
	53.Frail Elderly												0	0					
	54.Persons w/ Severe Mental Illness												0	0					
	55.Developmentally Disabled												0	0					
	56.Physically Disabled												0	0					
	57.Alcohol/Other Drug Addicted	0	0																
	58.Persons w/ HIV/AIDS & their families	1374	474			900													
	59.Public Housing Residents	0	0																
Total	0	0	0									0	0						
Supportive Services Needed	60.Elderly			279									0	0					
	61.Frail Elderly												0	0					
	62.Persons w/ Severe Mental Illness												0	0					
	63.Developmentally Disabled												0	0					
	64.Physically Disabled												0	0					
	65.Alcohol/Other Drug Addicted*	455	176	0	0														
	66.Persons w/ HIV/AIDS & their families	0	0																
	67.Public Housing Residents	0	0																
Total												0	0						
*Includes temporary housing/beds.																			

**Note:** Information in this Table is derived from data submitted by the Office of Deputy Mayor for Children, Youth Families and Elders, which oversees the human services agencies listed on page 27.  
[Must updated with HOPWA information]



Persons with HIV/AIDS: The needs of persons with HIV/AIDS are described more fully in Appendix B. The D.C. Department of Health, HIV/AIDS Administration (HAA) estimates that there are 38,296 people living with HIV or AIDS in Eligible Metropolitan Area (EMA), which includes the District of Columbia and neighboring counties in Maryland, Virginia and West Virginia, or 783 per 100,000 individuals. This population is heavily composed of minorities: 84 percent of the persons living with HIV or AIDS are persons of color, yet persons of color compose only 44 percent of the EMA population overall.

The HAA estimates that 10.5 percent of persons with HIV/AIDS who receive services under the Ryan White Title I program are either homeless or otherwise have unstable housing (institutionalized or in non-permanent housing). Many such individuals subsequently have only sporadic access to services, insofar as they tend to leave services when they lose housing, and return to services when their housing stabilizes. See Table 13 in the Homeless Needs section, page 36.

There are 22 service providers in Washington DC supplying tenant-based housing assistance or facility-based housing with supportive services. These are listed in Appendix B. The HAA seeks to expand its supply of housing providers, however. It has enumerated its needs for 2006-2010 as follows:

1. Continued implementation and review of the EMA's Strategic Spending Plan 2006 – 2010
2. Establish a diversified housing continuum of care through program development and access to non-AIDS specific housing resources;
3. Increase participation, collaboration and leveraging with Ryan White, local DHCD Block Grant, mental health, and substance abuse programs;
4. Improved reporting and client tracking;
5. Empower clients toward self sufficiency through vocational, home ownership and/or other rehabilitation;
6. Provide housing information and referral;
7. Direct all major rehabilitation, repair and acquisition projects to target local CDBG, HOME and ESG grants for funding. HOPWA funding will be used on a small scale and/or as the funding of last resort for rehabilitation, repair and acquisition projects; and
8. Establish housing plans and method to transition clients who are willing and able off assisted housing subsidies within a 30-month period.
9. Establish select housing demonstration programs for targeted groups such as women.
10. Develop Strategic Housing Plan for DC EMA
11. Provide housing mediation services for tenants and landlords.
12. Provide HUD Quality Standard Inspections for tenants.

### ***Challenges to Financing Special Needs Housing***

The ever-increasing cost of attaining housing in the District has also impacted the cost of *producing* housing. The challenge of meeting special housing needs has increased even more

than the general production costs. For example, in 2003, DHCD assisted in financing 2256 units of affordable housing at an average total development cost (TDC) of \$103,302 per unit, and an average subsidy of \$18,785 per unit, representing a leverage factor of 4.49 per subsidy investment. Specifically, the average costs per rental and special needs unit were:

<b>FY2003 Housing Cost and Subsidy</b>		
<b>Housing Type</b>	<b>Average TDC</b>	<b>Average Subsidy Per Unit</b>
? Rental	\$110,492	\$16,299
? Special Needs	\$97,117	\$19,171

In FY 2004, DHCD assisted in financing 1608 units of affordable housing at an average TDC of \$88,917 per unit. DHCD's subsidy grew to \$32,082 per unit and the leveraging factor was 1.77. The changes in production costs were as follows:

<b>FY2004 Housing Cost and Subsidy</b>		
<b>Housing Type</b>	<b>Average TDC</b>	<b>Average Subsidy Per Unit</b>
? Rental	\$95,402	\$19,650
? Special Needs	\$97,336	\$44,684

### ***Homeless Housing Needs***

Information in this section is provided by the Community Partnership for the Prevention of Homelessness (the Partnership), the District's sub recipient of Emergency Shelter Grant funds. The Partnership is an independent, nonprofit corporation established in 1989 to serve as a focal point for efforts to reduce and ultimately prevent homelessness in the District of Columbia. The Partnership currently serves as the lead agency for the District's homeless Continuum of Care under a FY 2005 contract from the Department of Human Services (DHS) – renewable for up to four option years based upon achievement of performance objectives. The contract funds the Partnership to address the needs of the District's homeless population, including the homeless and other special need subpopulations of the homeless (e.g., the frail elderly, chronically mentally ill, drug and alcohol abusers, and persons with HIV/AIDS).

The following tables reflect the Partnership's information<sup>24</sup> and analysis of homeless needs and gaps for Individuals and Families as currently measured; and they project the number of

<sup>24</sup> Sources of Data Used for Homeless Needs Tables

The data that informs the "Needs" column in the Tables 3 and 4 were derived from two sources: 1) the objectives of the District's 10-year plan to end homelessness with its focus on permanent housing, and 2) the point-in-time enumerations of 2003 and 2004 that provided data regarding the usage (occupancy) of different types of Continuum of Care facilities, percentages of subpopulations with special needs, and the number estimated to need specific kinds of supportive services. For example, data from the District's point-in-time enumeration showed occupancy of transitional beds for single adults and persons in families (combined) at 75% in 2003 and 71% in 2004. These data indicate there are sufficient transitional housing beds to meet the needs, although there is still a need for some specialized transitional units for specific populations. The planning task is thus to reallocate the transitional capacity more so than to build up the bed capacity in this part of the Continuum. .

The 10-year plan established permanent housing as the major gap that must be closed in the years ahead, with at least an additional 6,000 affordable housing units needed and to be created by 2014. Some of the housing needed is "permanent supportive housing" with services and some of it is simply housing that is affordable to adults and families with incomes at 10% to 20% of Area Median Income – an income level typical of those who become homeless. The strategy is designed both to end

units/beds of shelter and housing, as well as supportive services, to be added over the five year period of the Consolidated Plan.

Using its information, the Partnership developed the inventory of current programs, identifying them as serving men, women, families and specific subpopulations, and submitted the following chart to HUD in July 2004. (Page 34)

**Table 10: Housing Gaps Analysis Chart**

(as submitted to HUD in the 2004 SuperNOFA application for competitive McKinney -Vento homeless funds)

		<b>Current Inventory in 2004</b>	<b>Under Development in 2004</b>	<b>Unmet Need/ Gap</b>
<b>Individuals</b>				
<b>Beds</b>	Emergency Shelter	2,934	480	0
	Transitional Housing	1,001	114	0
	Permanent Supportive Housing	1,759	201	1,800
	<b>Total</b>	<b>5,694</b>	<b>490</b>	<b>1,800</b>
<b>Persons in Families with Children</b>				
<b>Beds</b>	Emergency Shelter	954	75	0
	Transitional Housing	1,293	92	113
	Permanent Supportive Housing	1,021	228	1,422
	<b>Total</b>	<b>3,268</b>	<b>320</b>	<b>1,535</b>

The “Current Inventory in 2004” numbers in the Housing Gaps Analysis Chart have been carried over to the “Current” columns in the “Beds” sections in the Homeless Needs Tables. However, the figures for the “gaps” in permanent housing are larger in these tables from what was stated in the Housing Gaps Analysis Chart because the Consolidated Plan tables reflect the need to develop all 6,000 permanent housing units, both permanent supportive housing “inside” a homeless Continuum of Care and permanent affordable housing without supportive services that is “outside” the Continuum of Care but will contribute to the prevention of homelessness. The larger figure reflects that Consolidated Plan resources and other District resources will be used to

the homelessness of some and prevent many other poor people from becoming homeless in the first place. The tables assume that about one-half of the overall objective of 6,000 units will be achieved between FY 2006 and FY 2010.

Data for completing the “Current” inventory column comes from various sources and is consistent with the “Housing Gaps Analysis Chart” that the Partnership completes as part of its annual application for HUD Continuum of Care funds. The following overview of how the “Housing Gaps Analysis Chart” is constructed can this serve as an introduction to the numbers in the tables.

During its annual point-in-time survey of homeless people and Continuum of Care facilities, always conducted in the third week of January, the Partnership asks for capacity data from every public and private agency operating homeless programs within the District of Columbia. Forms for “Individuals” and “Persons in Families” are distributed by fax and email to the agencies that then respond with data about the number of units and/or beds in their facility(ies) and the clients they serve. The numbers received are checked against the listing of facilities’ data from the previous year to see if anything has changed. The Partnership does email and phone follow-up contacts to clarify information. In some cases programs have opened, expanded, contracted or gone out of business. In some cases the Partnership discovers that a program is not targeted to the homeless as was previously indicated, causing that program to be removed from the inventory. At the end of the process the Partnership distributes the “Housing Activity Chart” that is required by HUD to providers and advocates via email and asks for final additions and corrections.

Other helpful information about the current inventory of programs and services comes from: a) program descriptions maintained on the Fannie Mae Foundation’s “Help the Homeless” walkathon web site; b) the Emergency Food and Shelter Directory published annually by the Interfaith Conference of Metropolitan Washington; c) input from the focus groups on men, women and families; and d) the directory of programs within the Partnership’s homeless management information system (HMIS).

develop *all* the affordable housing called for in 10-year plan, not just housing units inside the homeless Continuum of Care.

As for the enumeration of the District's homeless population itself, including the counts and estimates of homeless subpopulations, the Partnership's point-in-time enumeration covered all shelter and housing facilities within the District of Columbia and included an estimate of the street-bound population that was provided by eight outreach programs. Because the count is done in mid-winter, more persons who might normally stay in the streets are counted in shelters, reducing but not totally eliminating duplication of some persons who outreach organizations counted as "usually" living on the streets even if they were not seen on the day of the point-in-time count (January 21, 2004). In addition the Partnership is able to confirm the count from many shelters through the HMIS and daily census records it maintains, and thus able to craft estimates of the subpopulations both from the enumerations and estimates. The following chart from the 2004 SuperNOFA application used both enumerations (N) and estimates (E) to look at sheltered and unsheltered homeless persons.

**Table 11: Homeless Population and Subpopulations Chart**

<b>PART 1: HOMELESS POPULATION</b>	<b>SHELTERED</b>		<b>UNSHELTERED</b>	<b>TOTAL</b>
	<b>EMERGENCY</b>	<b>TRANSITIONAL</b>		
<b>Example:</b>	<b>75 (A)</b>	<b>125 (A)</b>	<b>105 (N)</b>	<b>305</b>
1. Homeless Individuals	2,726 (N)	765 (N)	316 (E)	3,807
2. Homeless Families with Children	262 (N)	276 (N)		538
2a. Persons in Homeless Families with Children	903 (N)	850 (N)		1,753
<b>Total (lines 1 + 2a)</b>	<b>3,629</b>	<b>1,614</b>		<b>5,559</b>
<b>Part 2: Homeless Subpopulations</b>	<b>Sheltered</b>		<b>Unsheltered</b>	<b>TOTAL</b>
1. Chronically Homeless	1,211 (N)		294 (N)	1,505
2. Severely Mentally Ill*	739 (N)		217 (N)	956
3. Chronic Substance Abuse	904 (N)		107 (N)	1,011
4. Veterans	612 (E)		36 (N)	648
5. Persons with HIV/AIDS	456 (E)		19 (N)	475
6. Victims of Domestic Violence	306 (N)		19 (N)	325
7. Youth (Under 18 years of age)	98 (E)		0	98

\* includes dually-diagnosed

Form HUD 40076

This chart *does not* include persons counted in “permanent supportive housing” within the Continuum of Care (since, as HUD requires, these are not considered to be “homeless” persons), but is limited to persons on the streets, in shelters and in transitional housing (thus the total count of 5,559 homeless persons). However, it was possible for the Partnership to use the distribution of homeless subpopulations that emerged from the point-in-time enumeration (augmented by other local data) to inform the “Supportive Services” and “People” sections of the following tables in order to project the services needed and subpopulations to be served over five years in *permanent* housing as well as emergency and transitional facilities.

#### Homeless Needs Table: *Families*

Based on current inventory and needs, and based upon the objectives for the first five years of the District’s *Homeless No More* 10-year plan to end homelessness, the Partnership estimates that the District will need to provide emergency shelter, transitional housing and/or permanent affordable housing units that will expand the current capacity to serve 4,075 families with an estimated 13,448 persons by the end of the next five years. Family homelessness results from combination of factors including low education and skills, job loss, scarcity of housing units affordable to families with extremely low incomes, and physical- and mental-health needs, and related social issues. However, there are currently only 990 family units providing shelter and housing to about 3,268 persons at the moment (FY 2005) to serve this population.

The 10-year plan calls for small increases in emergency shelter capacity (75 beds in additional hypothermia season capacity) and transitional housing (an additional 205 beds or 62 units of transitional housing, with 50 of these to serve families in the early stages of recovery from substance abuse). The major thrust of expanding capacity for families will be the creation of at least 3,000 new units of affordable and supportive *permanent* housing for families, to be added

Table 12: Homeless Families Needs

Homeless Needs		Needs- Current= Gap			5-Year Quantities								% of Goal		Priority Need Fund? Fund Source						
					Year 1		Year 2		Year 3		Year 4							Year 5		Cumulative	
					Goal	Actual	Goal	Actual	Goal	Actual	Goal	Actual						Goal	Actual	Goal	Actual
Beds	36.Emergency Shelters	1029	954	75	75	0	0	0	0	0	75	0	0%	L	Y	DC					
	37.Transitional Housing	1498	1293	205	92	66	47	0	0	204.6	0	0%	M	Y	HUD,VA						
	38.Permanent Housing	10921	1021	9900	558	1098	1098	1098	1098	4950	0	0%	H	Y	DC,HUD						
	Total	13448	3268	10180	725	1164	1145	1098	1098	5230	0	0%									
Supportive Services	39.Job Training	615	300	315	63	63	63	63	63	315	0	0%	M	Y	DC,HUD						
	40.Case Management	1376	835	541	108	108	108	108	108	541	0	0%	H	Y	DC,HUD						
	41.Substance Abuse Treatment	379	165	214	43	43	43	43	43	214	0	0%	H	Y	DC,HUD,HHS						
	42.Mental Health Care	199	41	158	32	32	32	32	32	157.5	0	0%	H	Y	DC,HUD,HHS						
	43.Housing Placement	3309	309	3000	300	300	300	300	300	1500	0	0%	M	Y	DC,HUD						
	44.Life Skills Training	454	276	179	36	36	36	36	36	178.5	0	0%	M	Y	DC,HUD						
	Other	0	0	0						0	0	0%									
People	45.Chronic Substance Abusers	508	101	407	81	81	81	81	81	406.6	0	0%	H	Y	DC,HUD						
	46.Seriously Mental Ill	284	61	223	45	45	45	45	45	223	0	0%	H	Y	DC,HUD,HHS						
	47.Dually Diagnosed	278	55	223	45	45	45	45	45	223	0	0%	H	Y	DC,HUD,HHS						
	48.Veterans	20	20	0	0	0	0	0	0	0	0	0%	M	Y	HUD,VA						
	49.Persons with HIV/AIDS*	1750	629	1121	224	224	224	224	224	1120	0	0%	L	Y	HUD,HHS						
	50.Victims of Domestic Violence	399	157	242	48	48	48	48	48	241.6	0	0%	L	Y	DC,HHS						
	51.Youth	2056	1641	415	83	83	83	83	83	415	0	0%	M	Y	DC,HUD,HHS						
	Other	0	0	0						0	0	0%									
Data provided by the Partnership except * provided by the DC HIV/AIDS Administration																					

Data provided by the Partnership except \* provided by the DC HIV/AIDS Administration

Table 13: Homeless Families Needs - HIV/AIDS Only

Homeless Needs		Needs- Current= Gap			5-Year Quantities								% of Goal	Priority Need	Plan to Fund?	Fund Source				
					Year 1		Year 2		Year 3		Year 4						Year 5		Cumulative	
					Goal	Actual	Goal	Actual	Goal	Actual	Goal	Actual					Goal	Actual	Goal	Actual
Beds	36.Tenant Based Rental	1000	400	600	120	120	120	120	120	120	600	0	0%							
	37.Emergency Housing	250	80	170	34	34	34	34	34	34	170	0	0%							
	38.Supportive Housing	500	149	351	70	70	70	70	70	70	350	0	0%							
	Total	1750	629	1121	224	224	224	224	224	224	1120	0	0%							
Supportive Services	39.Job Training	800	235	565	113	113	113	113	113	113	565	0	0%							
	40.Case Management	1720	629	1091	218	218	218	218	218	218	1090	0	0%							
	41.Substance Abuse Treatment	0	0	0							0	0								
	42.Mental Health Care	0	0	0							0	0								
	43.Housing Placement	0	0	0							0	0								
	44.Life Skills Training	800	235	565	113	113	113	113	113	113	565	0	0%							
	Other (Transportation	664	332	332	66	66	66	66	66	66	330	0	0%							
People	45.Chronic Substance Abusers	0	0	0							0	0								
	46.Seriously Mental Ill	0	0	0							0	0								
	47.Dually Diagnosed	0	0	0							0	0								
	48.Veterans	0	0	0							0	0								
	49.Persons with HIV/AIDS	1750	629	1121	224	224	224	224	224	224	1120	0	0%							
	50.Victims of Domestic Violence	0	0	0							0	0								
	51.Youth	0	0	0							0	0								
	Other	0	0	0							0	0								

Source: D.C. Department of Health, HIV/AIDS Administration

Table 14: Homeless Individuals Needs

Homeless Needs		Needs- Current= Gap			5-Year Quantities										% of Goal	Priority Need Plan to Fund? Fund Source				
					Year 1		Year 2		Year 3		Year 4		Year 5						Cumulative	
					Goal	Actual	Goal	Actual	Goal	Actual	Goal	Actual	Goal	Actual					Goal	Actual
Beds	20.Emergency Shelters	3414	2934	480	480	0	0	0	0	0	480	0	0%	M	Y	DC,HUD				
	21.Transitional Housing	1115	1001	114	14	100	0	0	0	0	114	0	0%	L	Y	HUD,VA				
	22.Permanent Housing	4759	1759	3000	300	300	300	300	300	300	1500	0	0%	H	Y	DC,HUD				
	Total	9288	5694	3594	794	400	300	300	300	300	2094	0	0%							
Supportive Services	23.Job Training	1435	728	707	141	141	141	141	141	141	707	0	0%	M	Y	DC,HUD				
	24.Case Management	4181	2574	1607	321	321	321	321	321	321	1607	0	0%	H	Y	DC,HUD				
	25.Substance Abuse Treatment	2570	737	1833	367	367	367	367	367	367	1833	0	0%	H	Y	DC,HUD,HHS				
	26.Mental Health Care	2081	405	1676	335	335	335	335	335	335	1676	0	0%	H	Y	DC,HUD,HHS				
	27.Housing Placement	4759	1759	3000	300	300	300	300	300	300	1500	0	0%	H	Y	DC,HUD				
	28.Life Skills Training	1380	849	530	106	106	106	106	106	106	530.3	0	0%	L	Y	DC,HUD				
	Other																			
People	29.Chronic Substance Abusers	1386	500	886	177	177	177	177	177	177	886	0	0%	H	Y	DC,HUD				
	30.Seriously Mental Ill	897	168	729	146	146	146	146	146	146	729	0	0%	H	Y	DC,HUD,HHS				
	31.Dually Diagnosed	1184	237	947	189	189	189	189	189	189	947	0	0%	H	Y	DC,HUD,HHS				
	32.Veterans	648	201	447	89	89	89	89	89	89	447	0	0%	M	Y	DC,HUD,VA				
	33.Persons with HIV/AIDS	520	121	399	80	80	80	80	80	80	399	0	0%	L	Y	DC,HUD,HHS				
	34.Victims of Domestic Violence	325	150	175	44	44	44	44	44	0	175	0	0%	L	Y	DC,HHS				
	35.Youth	98	49	49	10	10	10	10	10	10	50	0	0%	M	Y	DC,HUD,HHS				



to the current inventory of 1,021 beds or about 309 units of permanent supportive housing for families. The table thus shows the total gap in permanent affordable housing for families as 9,900 beds for 3,000 households, with one-half of this gap – i.e., 4,950 beds for 1,500 families – to be created in the next five years.

#### Homeless Needs Table: *Individuals*

The Partnership estimates that there are currently 9,288 individuals in need of emergency shelter, transitional housing and permanent housing. Current programs and funding provide shelter and housing for only 5,694 of these individuals, however, leaving a gap of 3,594 places.

#### Supportive Services Gaps: *Families and Individuals*

Beyond shelter or housing, the various homeless sub-populations need services while in the Continuum of Care and beyond it as they move to community-based housing. These services needs include job training and case management for some, but others need assistance with mental health care, substance abuse, or basic life skills treatment - the absence of which will make it more difficult for homeless individuals and families to find permanent, stable housing. Reading the “Gap” column across both tables, it can be seen that both families and individuals are facing shortages in necessary services. More than 1,000 adults in families and individuals on their own will need access to job training; about 1,800 will need access to mental health care; and 6,000 households will need help finding a permanent home.

#### Narrowing the Gaps within 5 Years

The tables do not indicate that all the gaps in shelter and services will be closed within five years, but the “Cumulative” goal over five years shows the expected achievement of meeting these needs by FY 2010. Given the plethora of needs and the shortage of services and beds described in Tables 3 and 4, the priority for the District with regard to the homeless is the continued expansion of the Continuum of Care as described in Appendix C, which provides a summary of the *Homeless No More* plan, with its emphasis on the creation of permanent housing, the expansion of wraparound mainstream supportive services, and increase in prevention efforts.

#### Non-Housing Community Needs

The Department is quantifying the various non-housing community needs listed in Table 15 on the following page in consultation with the various human services agencies and infrastructure agencies. Some information has been provided as of February 2005; the remainder is forthcoming.

The majority of these needs are not met directly through HUD funding. However, these needs must be met to improve the quality of neighborhoods and the delivery of services for District residents. The District’s plans to meet non-housing community needs include the following:

## **Employment and Training**

### **Training**

The DC Department of Employment Services (DOES) provides estimates on the need for job training and placement based on unemployment figures over the past several years. Approximately 22,000 people were estimated to be unemployed in 2003 and 2004.

Training is provided by DOES based on federal dollars received under the Workforce Investment Act (WIA). For the five-year plan period, DOES estimates providing training to a minimum of 650 adults each year. From that universe, 60% or 390 will be placed in jobs that pay at least \$2500 more than they were earning before they entered the program. Three hundred and twenty five (325) or 50% will receive an industry-recognized (non-apprenticeship) credential that will help foster their continued career development. .

### **Opportunity**

*Access to Employment:* DOES operates a network of “One-Stop Career Centers” three full service centers and five satellite centers throughout the city. Additionally there is a Mobile One Stop van that brings literacy and workforce development services to neighborhoods not directly served by the One Stop Centers. Through the Virtual One-Stop (VOS) Network, individuals seeking jobs or training, can search, self register, prepare resumes, and e-mail employers or training providers.

### **First Source and Apprenticeship**

The Department of Employment Services requires recipients of \$100,000 or other forms of government assistance to sign a First Source Employment Agreement to ensure that jobs created by the projects or contracts are listed with DOES and that 51% of the new jobs created are filled by District residents. Also, companies receiving contract awards for construction or renovation projects, supported or assisted by DC government funds of \$500,000 or more, are required to establish registered Apprenticeship programs with DOES and to hire District residents for new apprenticeships created.

DOES supported the increase in the minimum wage in the District of Columbia in FY 2004. The minimum wage was raised to \$6.60 an hour beginning in January 2005, and will increase to \$7.00 an hour in January 2006.

### **Business Development**

In the Office of the Deputy Mayor for Planning and Economic Development, under the “Main Streets” initiatives, several programs will continue to focus on neighborhood business development. The re-STORE, a District initiative which began in 2002, features investment in micro-loan funds and the acquisition and development of commercial properties. Through a partnership between the Office of Deputy Mayor, the DC Public Libraries and the US Small Business Administration, an “Enhanced Business Information Center (“e-BIC”)” was opened at

the main library. During regular library hours, the center is equipped with 10 computer workstations loaded with business software. There are small conference rooms, video-conferencing services, and SBA-provided reference materials and consultants.

A training room seating 40 persons is a feature of the e-BIC. Ten to 15 training sessions are provided annually to small businesses, especially focusing in the areas of access to credit, purchasing commercial property, and licensing. Additionally, mentoring is provided to between 30-40 small businesses.

Community Development Needs Table on page 44 shows the five-year projections for these business development activities under “Economic Development Needs.” Included are assistance for 1,500 for profit businesses; technical assistance for 1,500 businesses; and micro-enterprise assistance to 2,500 businesses. Additional assistance includes funding for commercial or industrial improvements for 85 businesses and rehabilitation of 85 public or private commercial projects. These business development initiatives are locally funded.

## **Infrastructure**

### **Managing Solid Waste**

Over the period of the five-year plan, the DC Department of Public Works (DPW) will focus on improving solid waste collection and disposal. DPW picks up residential household waste daily, and private collection operators also utilize the Department’s two solid waste transfer stations for their collected waste. Employing 40 trucks per day, DPW collects approximately 492 tons of residential household debris per day. DPW plans to collect and dispose of over 99% of daily waste in each of the five years of the Consolidated Plan at an approximate local cost of \$10.8 million annually.

### **Asbestos Abatement**

D-DOT will also undertake asbestos removal projects on an as-needed basis, utilizing \$250,000 in capital funds. These funds are designated for the abatement of asbestos discovered in District-owned buildings during various renovation projects. The Capital Construction Services Administration of the Office of Property Management oversees the use of these funds. The money is not designated for a particular building, but rather serves as a pool of funds to be used when asbestos is found. Given this scenario, it is difficult to forecast specific number of projects to be undertaken in a given year

### **Maintaining Access**

*Streets and Sidewalks*—The DC Department of Transportation ( D-DOT) repairs, reconstructs and maintains roadways, bridges, sidewalks, curbs, gutters and alleys, as well as plants and maintains street trees. D-DOT is also responsible for ensuring Americans with Disabilities Act (ADA) accessibility to the District’s transportation infrastructure. Over the five year plan period, D-DOT has set a goal of completing 500 street and 50 sidewalk improvement projects, as well as

100 accessibility projects. These projects will be funded with a combination of \$7,800,000 in local funds and \$48 million in federal transportation and other funds.

D-DOT partners with DHCD and other agencies in providing transportation support services. In FY 2005, for example, D-DOT will invest approximately \$1.9 million of DHCD capital funds to replace streetlights in the Bellevue community as part of neighborhood revitalization.

#### Water and Sewer:

The District of Columbia Water and Sewer Authority's ten-year capital improvement program totals \$2.1 billion. The program provides resources to support new initiatives and infrastructure improvements. For period FY 2005 through FY 2010, the program provides a total of \$1.4 billion for water, sewer and wastewater projects. These projects are important both to economic and community development in the District.

Some of the significant projects in DCWASA's capital program include our lead service line replacement program totaling \$300 million to abate lead in the drinking water. Also, our Combined Sewer Overflow Long-Term Control Program will significantly improve the health of the Anacostia and Potomac Rivers. A variety of other water and sewer projects planned for the neighborhoods will help water service reliability and quality and ensure the integrity of our sewer system.

#### **Social Services:**

##### Seniors

The D.C. Office on Aging manages the provision of services to seniors through government and non-profit service providers. The Office on Aging estimates that during the five-year period of the Consolidated Plan, the Office will oversee provision of services to 200,000 seniors. These services will be provided through a network of nonprofit organizations and will include a wide array of direct services such as counseling, case management, mid-day and homebound meals, transportation, health promotion and nutrition, legal services and other services needed by seniors to maintain their quality of living. Additionally, the Office of Aging projects providing services to 14,500 seniors who attend senior or wellness centers in the District of Columbia. Service to the frail elderly will focus on in-home support services for the homebound, and for the elderly, supportive services will be provided to independent and semi-independent elderly. These services will be funded with \$15 million in local funds and \$6.2 million in federal funds.

The Office on Aging is working to keep seniors in their homes and communities longer. The Office will assist seniors who seek employment to find jobs and will increase awareness and education on healthy life styles and wellness through its service centers. For seniors needing continuing care, the Office will monitor the percentage of homemaker and day-care participants who remain in their homes for one year or more.

Last, the Office on Aging is developing one "Health and Wellness Center" for each ward in the District. A typical senior wellness center is at least 10,000 square feet and provide health

promotion and disease prevention programs and activities that promote self-care, healthy lifestyles, and longevity for DC residents 60 years and older. These activities and programs can help seniors avoid costly hospitalization and premature institutionalization. Each Center is staffed by a team of health professionals and promoters that provide calisthenics, isometrics, stretching, dance, weight training, flexibility, and endurance with emphasis on nutrition and screenings for diabetes, hypertension, cancer, cardiovascular diseases, etc. Nutrition counseling, physical fitness, health care information, training, education, and peer support are the core curriculums. Multipurpose rooms (plus physical fitness activity area) can be divided for small to large groups of 20-150 for instruction and activities.

Ward	Site	Status
1	Georgia & Lamont	Acquisition & design
2		None to date
3		None to date
4	3 <sup>rd</sup> & Kennedy Streets, NW	Rehab imminent
5	18 <sup>th</sup> & Bryant, NE	Completed
6	5 <sup>th</sup> & "I"	Rehab imminent
7	Alabama Avenue	Completed
8	MLK Avenue	Completed

### Persons with Mental Illness

The Department of Mental Health will focus on developing strategies to provide affordable housing for persons with mental illness who are living on disability income (\$6,500 per year). The Department's goal is to find a way to move persons who no longer require institutional care into their own living quarters within 90 days. The Department will be working with other special interest and homeless-housing groups to develop cooperative strategies and initiatives including set asides in market housing developments.

In keeping with the Dixon decree, and in order for DMH to meet its exit criteria, the Department of Mental Health is working on a variety of different housing options for consumers. A mandate to provide timely supported housing service is specifically included in the 15 Dixon exit criteria. DMH is committed to providing housing based on consumer choice, in the least restrictive environment the consumer can handle, and costing no more than 30 percent of the consumers' income. DMH continues to work with a number of different housing developers, and are currently using the Housing Finance Agency as their housing finance intermediary.

### Neighborhood Amenities:

#### Parks and Recreation

The D.C. Department of Parks and Recreation (DPR) is not focusing on expansion of existing facilities or construction of new facilities at this time, but rather on improving access to existing facilities, better management and program operations.

The Department has set a number of operations goals: To increase by 10 percent annually the percent of DPR-owned facilities that meet ADA standards; To improve all child development facilities, working to reach a goal of 90 percent of facilities maintaining national accreditation during 2005; and to increase to 98 percent the percentage of reimbursable meals within its summer food program.

Its customer satisfaction and facilities management goals include the following: To survey and obtain a 65 percent satisfaction level among parents of children in the summer urban day camps; and to increase to 98 percent (by 2005) the percentage of DPR-owned and operated swimming pools that open and close on schedule

## **Public Safety:**

### *Crime Awareness*

The Metropolitan Police Department has an ambitious plan for implementation of its Crime Awareness Program over the five-year plan period. Over the period 1,050,660 people will be reached at a combined federal/local cost of \$20,959,770. Almost \$19 million of this cost is in local appropriations.

Activities will be carried out throughout the District's police districts and consist of a variety of activities from patrol area meetings, to language access (Hispanic and Asian languages); distribution of materials; organizing Night-Out and other awareness events; school and organization presentations; conducting youth violence prevention activities such as Late Night Hoops; Girl Gang conferences, etc.; responding to inquiries and many forms of prevention training for the community.

### *Neighborhood "Hot Spots"* (See also "Targeting")

In FY 2005, DHCD is targeting \$1.0 million in CDBG funds to prevent and reduce crime in certain designated "hot spots," as part of a city-wide strategy toward improving livability, while capitalizing on other efforts toward revitalization of those neighborhoods. Improvements in public safety have a direct impact on the availability and desirability of affordable housing.

Working with other city agencies, DHCD will invest in public safety initiatives that serve to enhance the overall stability and vitality of those neighborhoods. Depending on funding availability in the first year, program results, and crime statistics, DHCD may repeat this level of investment on public safety initiatives in successive years of the five-year period covered by the Plan.

Table 15: Community Development Needs

Community Development Needs		Needs-	Current=	Gap	5-Year Quantities					
					2006		2007		2008	
					Goal	Actual	Goal	Actual	Goal	Actual
Public Facilities	68.Senior Centers									
	69.Youth Centers	0	0	0						
	70.Neighborhood Facilities	0	0	0						
	71.Child Care Centers	0	0	0						
	72.Parks/Recreational Facilities	0	0	0						
	73.Health Facilities	0	0	0						
	74.Parking Facilities	0	0	0						
	75.Other Public Facilities	0	0	0						
Infrastructure Improvement	76.Solid Waste Disposal	492	492	0	99.30%	99.50%		99.60%		
	77.Flood Drainage	0	0	0						
	78.Water	0	0	0						
	79.Street	500	100	400	100	100		100		
	80.Sidewalk	50	10	40	10	10		10		
	81.Sewer	0	0	0	On as needed basis					
	82.Asbestos	0	0	0						
	83.Clean/Secure vacant units	0	0	2,475	650	500		475		
Public Service	84.Senior Services*	214,500	51,597	162,903	52,700	53,800		54,900		
	85.Handicapped Services	0	0	0						
	86.Youth Services	0	0	0						
	87.Transportation Services	0	0	0						
	88.Substance Abuse Services	0	0	0						
	89.Employment Training**	3,900	650	3250	650	650		650		
	90.Crime Awareness	1,050,660	177,225	873435	180,028	193,755		208,744		
	91.Fair Housing Counseling	0	0	0						
	92.Tenant/Landlord Counseling	0	0	0						
	93.Child Care Services	0	0	0						
	94.Health Services	0	0	0						
	95.Other	0	0	0						
96. Accessibility		250	20	230	20	20		20		
97. Residential Historic Preservation		0	0	0						
98. Non-Residential Historic Preservation		0	0	0						
99. Economic Development Needs***		0	0	0						
Assist for profit businesses		200	100	100						
TA to businesses (# of businesses)		200	100	100						
Micro enterprise assistance (businesses)		300	200	100						
Fund commercial or industrial improvements		100	10	90						
Rehab public or private commercial projects		100	10	90						
100.Other Community Development Needs		0	0	0						
101.Planning		0	0	0						
TOTAL ESTIMATED DOLLARS NEEDED		0	0	0						

See notes, page 46.

Table 15: Community Development Needs, continued

Community Development Needs		5-Year Quantities (cont'd)						% of Goal	Priority Need	Plan to Fund?	Fund Source
		2009		2010		Cumulative					
		Goal	Actual	Goal	Actual	Goal	Actual				
Public Facilities	68.Senior Centers					14,500	0	0%	H	n/a	
	69.Youth Centers					0	0	#DIV/0!			
	70.Neighborhood Facilities					0	0	#DIV/0!			
	71.Child Care Centers					0	0	#DIV/0!			
	72.Parks/Recreational Facilities					0	0	#DIV/0!			
	73.Health Facilities					0	0	#DIV/0!			
	74.Parking Facilities					0	0	#DIV/0!			
	75.Other Public Facilities					0	0	#DIV/0!			
Infrastructure Improvement	76.Solid Waste Disposal	99.70%	99.80%		4.979	0	0%	H	\$10.80	local	
	77.Flood Drainage			0	0	#DIV/0!					
	78.Water			0	0	#DIV/0!					
	79.Street	100	100		500	0	0%	H M	\$53.8M \$1.0M	Fed/local Fed/local	
	80.Sidewalk	10	10		50	0	0%				
	81.Sewer			0	0	#DIV/0!					
	82.Asbestos			0	0	#DIV/0!		\$250K	CIP/loc		
	83.Clean/Secure vacant units	450	400		2475	0	0%				
Public Service	84.Senior Services*	56,100	57,100		274,500	0	0%	H	\$15M lcl	6.2M fed	
	85.Handicapped Services			0	0	#DIV/0!					
	86.Youth Services			0	0	#DIV/0!					
	87.Transportation Services			0	0	#DIV/0!	H	\$2.7M fed (WIA est \$18.9M lcl	\$1.9M fed		
	88.Substance Abuse Services			0	0	#DIV/0!					
	89.Employment Training**	650	650		3250	0				0%	
	90.Crime Awareness	225,119	243,014		1050660	0	0%	H-M			
	91.Fair Housing Counseling			0	0	#DIV/0!					
	92.Tenant/Landlord Counseling			0	0	#DIV/0!					
	93.Child Care Services			0	0	#DIV/0!					
	94.Health Services			0	0	#DIV/0!					
	95.Other			0	0	#DIV/0!					
96. Accessibility		20	20		100	0	0%	M	\$1.M	Fed/local	
97. Residential Historic Preservation						0	0	#DIV/0!			
98. Non-Residential Historic Preservation						0	0	#DIV/0!			
99. Economic Development Needs***						0	0	#DIV/0!			
Assist for profit businesses		350	400		1,500			H			\$1.5M lcl
TA to businesses (# of businesses)		350	400		1,500			H			\$1.5M lcl
Micro enterprise assistance (businesses)		600	700		2,500			H			\$1.5M lcl
Fund commercial or industrial improvements		20	20		85			M			\$25M lcl
Rehab public or private commercial projects		20	20		85			M			\$25M lcl
100.Other Community Development Needs						0	0	#DIV/0!			
101.Planning						0	0	#DIV/0!			
TOTAL ESTIMATED DOLLARS NEEDED						0	0	#DIV/0!			

See notes, following page.



Notes to Table 15

\* Services provided to seniors who attend senior or wellness centers, either District-operated or through a network of nonprofit organizations that provide a wide array of direct services, including counseling, case management, mid-day and homebound meals, transportation, health promotion and nutrition, legal services and many other services for seniors to maintain their quality of life.

\*\*Intensive training services funded with Workforce Investment Act funds (WIA). Estimated at \$2.7 per year, but trending to be less over time. Of the 650 individuals trained each year, 60% or 390 will be placed in jobs that pay at least \$2500 more than they earned before the program; and 325 or 50% of participants will receive an industry recognized (non-apprenticeship) credential that will help foster their continued career development.

\*\*\* DC Main Streets and reSTORE DC Programs: Through a partnership between the Office of the Deputy Mayor for Planning and Economic Development, the DC Public Libraries and the US Small Business Administration, DC has opened an "Enhanced Business Information Center" ("e-BIC") at the main library. Open regular library hours, the center is equipped with 10 computer work stations loaded with business software, small conference rooms, video conferencing and SBA-provided reference materials and consultants. Ten to 15 training sessions are provided annually to small businesses, especially focusing in the areas of access to credit, purchasing commercial property and licensing. Mentoring is provided to between 30-40 small businesses. A training room seating 40 persons is also a feature of the e-BIC. A new initiative is the creation of a certification program for small business development service providers and the development of a customer loyalty program to benefit DC retailers. Investment in micro loan funds, and the acquisition and development of commercial properties are features of the reSTORE DC program, a mayoral initiative started in 2002.